



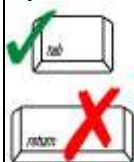
Massachusetts Department of Environmental Protection

Well Driller Certification Program

Well Completion Report Request

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



In accordance with M.G.L. c. 66 § 10, (the Massachusetts Public Records Law), MassDEP provides access to public records in its possession. This form is to be used to request a copy of a Well Completion Report(s). MassDEP will respond to such a request in accordance with M.G.L. c. 66 § 10.

Please answer the following questions as completely as possible and return this form via email to Stephen.Hallem@state.ma.us or by fax at 617-292-5696.

CONTACT INFORMATION

Name _____

Address _____

Phone _____ Fax _____

E-mail _____

TYPE OF WELL(s)

☐ Domestic ☐ Irrigation ☐ Geothermal ☐ Monitoring ☐ Other ☐ Don't Know

LOCATION OF WELL(s)

Street Address/Lot Number _____

City/Town _____

ADDITIONAL WELL INFORMATION

Date well was installed _____

Driller or drilling company _____

Owner of well _____ Are you the original owner? ☐ Yes ☐ No

Name(s) of previous owner(s) _____

COMMENTS (for multiple well requests please provide additional information such as maps, list of streets, etc.)

COMMONWEALTH OF MASSACHUSETTS · EXECUTIVE OFFICE OF ENERGY & ENVIRONMENTAL AFFAIRS

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